

## **OFFICE OF THE SHERIFF**

Michael J. Bouchard Forensic Science Laboratory

## **RESULTS** Drug & Alcohol Testing Program

## <u>PBT Log</u>

Print Client Name				Court		Probation Officer		
Client Signature			CStar ID #	CStar ID # Letter		Case Manager		
DATE	LOCATION OF PBT	BADGE # OF TESTER	SIGNATURE OF TES	TER	TESTERS PHONE NUMBER	RESULTS	TIME	
	DTL og dog Doy 02 22 2011		1		•			

RESULTS\_F11\_PBTLog.doc Rev. 03.22.2011

OAKLAND POINTE OFFICE 250 ELIZABETH LAKE RD SUITE 1700 PONTIAC MI 48341 OFFICE: 248.451.2358 RESULTS FAX: 248.451.2329

All PBTs are to be administered at the RESULTS Program. If a PBT is done elsewhere, You are responsible for faxing each PBT result **on the day the PBT is required**, to the RESULTS Program during our business hours. SOUTH OAKLAND OFFICE 1151 CROOKS ROAD TROY MI 48084 OFFICE: 248.655.1259 FAX: 248.655.1278